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STD. 262 (REV. 7/2005)

CLAIMANT'S NAME		SSN or EMPLOYEE NUMBER*		DEPARTMENT	
LAURA N. CHICK				Planning & Research	
POSITION		CB/ID No.	DIVISION or BUREAU		INDEX NUMBER
Inspector General		Exempt	Governor's Office		226
RESIDENCE ADDRESS*			HEADQUARTERS ADDRESS		TELEPHONE NUMBER
			1400 Tenth Street		
CITY		STATE	ZIP	CITY	
CA				Sacramento	
				CA	
				95814	

(1) MONTH/YEAR		(3) LOCATION WHERE EXPENSES WERE INCURRED	(4) LODGING	(5) MEALS			(6) INCIDENTALS	(7) TRANSPORTATION				(8) BUSINESS EXPENSE	(9) TOTAL EXPENSES FOR DAY	
(2) DATE	TIME			BREAK-FAST	LUNCH	O.T., L/T, N/C, RELO, OR DINNER		(A) COST OF TRANS	(B) TYPE USED	(C) CARFARE, TOLLS, PARKING	(D) PRIVATE CAR USE			
											MILES			AMOUNT
2/12	14:30	Burbank							40.00				40.00	
2/24		Los Angeles							10.00				10.00	
2/26		Los Angeles							6.00				6.00	
2/28	20:00	Sacramento							40.00				40.00	
SUBTOTALS									96.00				96.00	
COLUMN CODE (ACCTG. USE ONLY)														
CLAIM TOTAL												96.00		

1) PURPOSE OF TRIP, REMARKS AND DETAILS (Attach receipts/vouchers when required)

synote speaker, Women in Leadership Summit at UC Irvine. Panelist on Speaker Karen Bass'
nall Business Townhall meeting. Conducted various business meetings/phone calls from Governor's
Los Angeles office.

(12) NORMAL WORK HOURS

(13) PRIVATE VEHICLE LICENSE NUMBER

(14) MILEAGE RATE CLAIMED

0.55

AGENCY ACCOUNTING OFFICE

USE ONLY

PAID BY REVOLVING FUND CHECK NUMBER

I HEREBY CERTIFY That the above is a true statement of the travel expenses incurred by me in accordance with DPA rules in the service of the State of California. If a privately owned vehicle was used, and if mileage rates exceed the minimum rate, I certify that the cost of operating the vehicle was equal to or greater than the rate claimed, and that I have met the requirements as prescribed by SAM Sections 0750, 0751, 0752, 0753 and 0754 relating to vehicle safety and seat belt usage.

MANT'S SIGNATURE

DATE _____

(16) SIGNATURE OF OFFICER APPROVING TRAVEL AND PAYMENT

DATE _____



Thank you!

Your Confirmation is NTMOXX



Continue to Book Your Car

Our fares are low, and so are our car rental rates. Search cars using the travel dates and destination from your air reservation.



Book a Flight



Book a Cruise

Air

Adult 1: LAURA CHICK

Acct#: 00000090958674

Confirmation # NTMOXX

AIR ITINERARY

DEPART FEB 12	Wanna Get Away Fare Sacramento, CA to Burbank, CA Friday, February 12, 2010 Travel Time 1 h 10 m (Nonstop)	#882	Depart Sacramento, CA (SMF) Arrive in Burbank, CA (BUR)	3:45 PM 4:55 PM
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RETURN FEB 28	Wanna Get Away Fare Burbank, CA to Sacramento, CA Sunday, February 28, 2010 Travel Time 1 h 15 m (Nonstop)	#2697	Depart Burbank, CA (BUR) Arrive in Sacramento, CA (SMF)	5:55 PM 7:10 PM
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BILLING

INTERNAL REFERENCE NUMBER: (NONE)

Purchaser Name	Form of Payment	Billing Address	Amount Applied
Billed to Account "SWABIZ AmEx"	XXXXXXXXXX1017	Billing address information is on file.	\$10.00

AIR PRICING

Passenger Type	Trip	Routing	Fare Type	Base Fare	Govt. Taxes and Fees	Quantity	Total
Adult	Depart	SMF-BUR	Wanna Get Away	\$91.16	\$17.54	1	\$108.70
Adult	Return	BUR-SMF	Wanna Get Away	\$64.19	\$15.51	1	\$79.70
				\$155.35	\$33.05	1	\$188.40

L .A. Live

EPOF4 02/24/10 14:04
Receipt 001813

Short-term parking tkt
2 - No. 097905
02/24/10 11:59 -
02/24/10 14:04 -
Period 0d2h6'
(Ust.) \$10.00

Total \$10.00

Payment Received
VISA \$10.00
Thank you for visiting
L. A. LIVE
213 742-7275

Sub Total \$10.00

1/1 All Amounts in USD.

00059825 - 1/1
 parking for
lunch 11:59 - 1:00
RYAWBO


THIS CONTRACT LIMITS OUR LIABILITY—READ IT
Customer and Company agree: When you retain keys to the car, you agree that you will park it in a designated area and at your sole risk; that you will set parking brake before leaving car; that you will lock same; and that you retain care, custody and control of the car, its parts and contents. When Company retains the keys to the car you agree: that Company is not responsible for articles left in car or for damage caused by fire, defective brakes or parts; that Company is not responsible for car after closing time; that Company is not responsible for loss of use; that all claimed damage for which Company may be liable must be reported and itemized by you to attendant before you leave the parking facility and if not so made is waived; and that court actions must be filed within 90 days from the date of parking, in court of jurisdiction where claimed loss occurred; that Company may park car on adjacent lot operated or under contract of Company. All losses for which Company is liable are limited to \$500. Company is not liable for any loss due to or attributable to bodily injury or death. Customer waives all laws in conflict with this contract and no employee may modify any of its terms. By your acceptance of this ticket you agree to all the foregoing terms.

WE CLOSE AS POSTED
Los Angeles Garage Assoc.
545 S. Main St.
203

5
TM
Operated By
Five Star Parking

137438

DIGITAL PRINTING SYSTEMS, AZUSA, CA

INDEPENDENT TAXI COMPANY
Since 1977 www.taxi4u.com
800-LA1-TAXI
521-8294

Date 2/12/10 Cab # _____
Driver _____ Total \$40.00
From Burbank Airport
To Silverlake home
For Inquiries, Complaints or Lost Items Please Call 323-666-0040
Driver May Request Payment or Deposit in Advance

TAXI ON TIME

(916) 613-8666
Passenger Receipt
DATE 2/28/10
FROM Sac Airport
TO _____
FARE \$ _____
CAB NUMBER # 4 TIPS \$ _____
DRIVER'S NAME AZIZ TOTAL \$ 40.00